

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 014594-003010US

First Inventor Tawil, Joseph

Title PROJECTOR ATTACHMENT FOR ELLIPSOIDAL LAMP

Express Mail Label No. EV330856789US

10/652649
08/28/03**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning design patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. Applicant claims small entity status.
See 37 CFR 1.27.
3. Specification [Total Pages 11]
(preferred arrangement set forth below)
 - Descriptive title of the Invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) (35 U.S.C.113) [Total Sheets 6]
5. Oath or Declaration [Total Pages 3]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63 (d))
(for a continuation/divisional with Box 18 completed)
 - i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76

ADDRESS TOMail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper number of pages
 - c. Statements verifying identity of above copies

ACCOMPANYING APPLICATIONS PARTS

9. Assignment Papers (cover sheet & document(s))
10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney
11. English Translation Document (if applicable)
12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
13. Preliminary Amendment
14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent
17. Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP) of prior application No: _____

Prior application information: Examiner _____ Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS Customer Number

20350

OR Correspondence address below

Name					
Address					
City	State		Zip Code		
Country	Telephone		Fax		

Name (Print/Type)	William Michael Hynes	Registration No. (Attorney/Agent)	24,168
Signature	William Michael Hynes		Date 8/28/03

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Mail Stop Patent Application, P.O. Box 1450, Alexandria, VA 22313-1450. 60027843 v1

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 375

Complete if Known

Application Number	
Filing Date	
First Named Inventor	Tawil, Joseph
Examiner Name	
Art Unit	
Attorney Docket No.	014594-003010US

METHOD OF PAYMENT (check all that apply)

Check Credit Card MoneyOrder Other None

 Deposit Account:

Deposit Account Number

20-1430

Deposit Account Name

Townsend and Townsend and Crew LLP

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	750	2001	375	Utility filing fee	375
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1)

(\$375)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

		Extra Claims	Fees from below	Fee Paid
Total Claims	9	-20** = 0	X\$9	\$0
Independent Claims	2	-3** = 0	X\$42	\$0
Multiple Dependent		X		

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$0)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
	1051	130		2051	65	Surcharge - late filing fee or oath	
	1052	50		2052	25	Surcharge - late provisional filing fee or cover sheet.	
	1053	130		1053	130	Non-English specification	
	1812	2,520		1812	2,520	For filing a request for reexamination	
	1804	920*		1804	920*	Requesting publication of SIR prior to Examiner action	
	1805	1,840*		1805	1,840*	Requesting publication of SIR after Examiner action	
	1251	110		2251	55	Extension for reply within first month	
	1252	410		2252	205	Extension for reply within second month	
	1253	930		2253	465	Extension for reply within third month	
	1254	1,450		2254	725	Extension for reply within fourth month	
	1255	1,970		2255	985	Extension for reply within fifth month	
	1401	320		2401	160	Notice of Appeal	
	1402	320		2402	160	Filing a brief in support of an appeal	
	1403	280		2403	140	Request for oral hearing	
	1451	1,510		1451	1,510	Petition to institute a public use proceeding	
	1452	110		2452	55	Petition to revive – unavoidable	
	1453	1,300		2453	650	Petition to revive – unintentional	
	1501	1,300		2501	650	Utility issue fee (or reissue)	
	1502	470		2502	235	Design issue fee	
	1503	630		2503	315	Plant issue fee	
	1460	130		1460	130	Petitions to the Commissioner	
	1807	50		1807	50	Petitions related to provisional applications	
	1806	180		1806	180	Submission of Information Disclosure Stmt	
	8021	40		8021	40	Recording each patent assignment per property (times number of properties)	
	1809	750		2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))	
	1810	750		2810	375	For each additional invention to be examined (37 CFR § 1.129(b))	
	1801	750		2801	375	Request for Continued Examination (RCE)	
	1802	900		1802	900	Request for expedited examination of a design application	
	Other fee (specify) _____						
	*Reduced by Basic Filing Fee Paid					SUBTOTAL (3)	(\$)

*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	William Michael Hynes	Registration No. (Attorney/Agent)	24,168	Telephone	415-576-0200
Signature	William Michael Hynes			Date	8/28/03

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